Child Care Licensing and Regulatory Services

Section 3: CURRENT CHILD CARE FACILITY STAFF/CAREGIVER CHECKLIST

Name of facility: Date:																			
	Position	Date of Birth	Social Security Number	Employment Start Date	Employment End Date	Primary Age Range Assigned	For DSS Child Care Licensing Use Only												
Name							To be Collected by Licensing Specialist			y st	To be Maintained in Employee File								
							Degree ese		giver	nt of ance (25)	sults	rint ts	t/Child	p <u>i</u>	ement 01) *	of nce	Policy*	ecord	
							Level	Validated	Consent to Release Info.(DSS2924)	Staff Care List Stateme Complia	Statement of Compliance (DSS2925)	SLED Results	Fingerprint Results	CPR Infant/Child	First Aid	Med Statement (DSS 2901) *	Years of Experience	Discipline Policy*	Training Record

Total Staff:	(Page	of)
DSS Form 2964 (NOV 99) Edition of MA	R 94 is obsolete.		•